Full Name: CONNICE MEGGS  Address:  CONCEALED WEAPON OR FIREARM LICENSE STATE OF FLORIDA  HERST MINISTER  HERS
Phone:  3(2-598-8614  Email:  HEGGS, COMPLE 4  DESTRIBUTE SECTION SECT
Social Media: #ACE BOOK   PANCEL  Employment: (Retired or Working)  Vocauteer - Awrie Jahrson Harift.
A valid Concealed Carry (CCW) can be submitted in lieu of criminal background screening.  If you do not possess a CCW, please submit your Social Security Number for background screen.  SSN:  Please attach a photocopy of Driver License/State ID Card and Florida CCW
Driver License/State ID submitted:  CCW submitted:  Please email this form to

State vetting officer

Toutact you for a short interview